								Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL I	ENTITY	OR		R THAN ENTITY
T	OTAL CLAIMS	5	12		· ·			RATE	FEE	7	RATE	FEE
FOR			NUMBER	NUMBER FILED		BER EXTRA	·	BASIC FE	€ 385.00	OR	BASIC FEE	770.00
Ŧ	OTAL CHARGE	ABLE CLAIMS	/2 minus 20=		.0			XS 9=		OR	X\$1,8=	
IN	DEPENDENT (ZAIMS	9 minus 3 =		.0			X43=	86	OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		ОЯ	+290=	•
• If the difference in column 1 is less than zero, enter "O" in column 2									471	OR	TOTAL	
CLAIMS AS AMENDED - PART II								CHALL		•	OTHER	
	1	(Column 1)		(Colun		3	SMALL	ENTITY	OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIO PAID F	OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 12	Minus	- 2	0	. —		X\$ 9=		OR	X\$18=	
AME	Independent 5 Minus			5	1.		X43=		OR	X86=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
-11								TOTAL			TOTAL	
1	7/5/05	A	DOIT. FEE		,	ADDIT, FEE						
e B		(Column 1) CLAIMS REMAINING		(Colum	ST	(Column 3)	Г		ADDI-	1		ADDI-
AMENDMENT B.		AFTER AMENDMENT		PREVIO	USLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	• 9	Minus	- 2	70	. ^ .		X\$ 9=		OR	X\$18=	
	Independent	• 2	Minus	SENIDENT.	S A/24	-		X43=.		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
TOYAL ADDIT. FEE										OR	YOYAL DDIT, FEE	
(Column 1) (Column 2) (Column 3)											WUII. FEEL	•
,	`	CLAIMS REMAINING	·	HIGHE	ST	·			ADDI-	ſ	1	ADDi-
		AFTER AMENDMENT		PREVIOL PAID F	ISLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL
AMENDMENT C	Total .	•	Minus	**		•		X\$ 9=		OR	X\$18=	FEE
	Independent		Minus	000	10	•	⊢	X43=		.	X86≈	
	FIRȘT PRESE	NTATION OF MU	A73-		OR	~60 0≅	 ∮					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+290-	<u> </u>
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE With This "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "30."											TOTAL DOIT, PEE	
1	he "Highest Num	moer Previously Paid Ider Previously Paid	is for (Total or	SPACE is independen	iess that d) is the	n 3, enter "3.". highest number			ropriate box		•	
								•		•		

CHIMPTON S INDV. (UND)

Patient and Tradement Office, U.S. DEPARTMENT OF COMMERC